Occupation may include student or homemaker, if it applies.	Employer's address			
self-employed work.	Employer's name	Coello and Associates	Foundations	
Include part-time, seasonal, or	•		Foster Care Case Management	
information about additional	Employment status	☐ Not employed	☐ Not employed	
If you have more than one job,	Employment status	■ Employed	■ Employed	
Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse	
as complete and accurate as poss plying correct information. If you use. If you are separated and you ch a separate sheet to this form. (sible. If two married pec are married and not fili r spouse is not filing w	ng jointly, and your spouse is livith you, do not include informati	ing with you, include information about your on about your spouse. If more space is needed	
	ome		12 Million / 1777	
fficial Form 106l			A supplement showing postpetition chapte 13 income as of the following date: MM / DD/ YYYY	
nown)		-	An amended filing	
se number 18-23131			Check if this is:	
	EASTERN DISTRICT	OF WISCONSIN		
<u></u>	an Lorum			
otor 1 Daniel Thom	as Lorum			
	fficial Form 106l chedule I: Your Incomplying correct information. If you are separated and you che a separate sheet to this form. If you are separated and you che a separate sheet to this form. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation may include student	fficial Form 106l chedule I: Your Income as complete and accurate as possible. If two married per plying correct information. If you are separated and your spouse is not filing with a separate sheet to this form. On the top of any additional employers. Include part-time, seasonal, or self-employed work. Describe Employer temployer's address Employer's address	ited States Bankruptcy Court for the:EASTERN DISTRICT OF WISCONSIN See number 18-23131	

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

Estimate and list monthly overtime pay. 3.

Calculate gross Income. Add line 2 + line 3.

			non-	filing spouse
2.	\$	2,866.50	\$	3,750.00
3.	+\$	0.00	+\$	0.00
4.	\$	2,866.50	\$_	3,750.00

For Debtor 2 or

For Debtor 1

Official Form 106I

18-23131 Case number (if known)

						For	Debtor 1		Debtor 2 or n-filing spouse	
	Сору	/ line 4 here			4.	\$	2,866.50	\$	3,750.00	
5.	List a	all payroll deduct	tions:							
	5a.		and Social Secur	ity deductions	5a.	\$	564.59	\$	589.23	
	5b.		ributions for reti	-	5b.	\$	0.00	\$_	0.00	
	5c.	•	ibutions for retire	•	5c.	\$_	0.00	\$	0.00	
	5d.	•	ments of retireme	•	5d.	\$	0.00	\$	0.00	
	5e.	Insurance			5e.	\$	0.00	\$_	555.47	
	5f.	Domestic supp	ort obligations		5f.	\$_	0.00	\$_	0.00	
	5g.	Union dues	on obligations		5g.	\$	0.00	\$_	0.00	
	5h.	Other deduction	ns. Specify:		5h.+	· -		+ \$-	0.00	
6.	Add			5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	564.59	\$	1,144.70	
7.	Calc	ulate total month	ly take-home pay	 Subtract line 6 from line 4. 	7.	\$	2,301.91	\$	2,605.30	
8.	List a 8a.	profession, or f Attach a stateme	n rental property arm ent for each proper y and necessary b	d: and from operating a business rty and business showing gross usiness expenses, and the total	s, 8a.	\$	0.00	\$	0.00	
	8b.	Interest and div	idends		8b.	\$	0.00	\$	0.00	
	8c.	regularly receiv Include alimony,	е	ou, a non-filing spouse, or a depote the control of		\$	0.00	\$_	0.00	
	8d.	Unemployment	compensation		8d.	\$	0.00	\$	0.00	
	8e.	Social Security			8e.	\$	0.00	\$	0.00	
	8f. 8g.	Include cash ass that you receive, Nutrition Assista Specify: Pension or retir	sistance and the variable such as food star nce Program) or herement income		ental 8f. 8g.	\$ \$	0.00 0.00	\$_ \$_	0.00	
	8h.	Other monthly i	ncome. Specify:	Mileage Reimbursement	8h.+	\$	0.00	+ \$_	805.35	
9.	Add	all other income.	Add lines 8a+8b	+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$_	805.35	
10.		ulate monthly inc the entries in line 1		+ line 9. d Debtor 2 or non-filing spouse.	10. \$	2	2,301.91 + \$_	3,	410.65	5,712.56
11.	Includ other	de contributions from triends or relative ot include any amo	om an unmarried _l es.	the expenses that you list in Spartner, members of your householded in lines 2-10 or amounts that	old, your depen				Schedule J. 11. +\$	0.00
12.		that amount on th		line 10 to the amount in line 11. hedules and Statistical Summary					12. \$	5,712.56
13.	Do y	ou expect an inc	rease or decreas	e within the year after you file th	his form?				Combine	
		No.								
		Yes. Explain:								

Fill	in this informa	ation to identify yo	ur case:						
Deb		Daniel Thoma		n		Ch	eck if	this is:	
					-		An	amended filing	
Deb	tor 2 ouse, if filing)	Jessica Susa	n Lorum	1					ving postpetition chapter the following date:
Unite	ed States Bank	ruptcy Court for the:	EASTE	RN DISTRICT OF WISCO	NSIN		MM	I / DD / YYYY	
Case	e number 1	8-23131							
(If kr	nown)								
Of	ficial Fo	orm 106J							
		J: Your E							12/1
info	rmation. If n		eded, atta	If two married people ar ch another sheet to this n.					
Part	11: Desc	ribe Your Housel	hold						
••	□ No. Go t								
	Yes. Do	es Debtor 2 live i	n a separa	ate household?					
	■ N		t file Officia	al Form 106J-2, <i>Expense</i> s	for Separate House	hold of De	ebtor 2	2.	
2.		ve dependents?	□No	, ,,					
	-	Debtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relation			Dependent's age	Does dependent live with you?
	Do not state	the							□ No
	dependents				Son			6	Yes
					Son			9	□ No ■ Yes
									■ res
									Yes
									□ No □ Yes
3.		penses include		No					□ Tes
		of people other th nd your depender	nan $_{\square}$	Yes					
exp	imate your e	a date after the b	ur bankru	y Expenses uptcy filing date unless y y is filed. If this is a supp					
• • •			on-cash (government assistance i	f vou know				
the		ch assistance and		luded it on Schedule I:)				Your expe	enses
4.		or home ownersh		ses for your residence. I	nclude first mortgage	4.	\$_		1,100.00
	If not inclu	ded in line 4:							
	4a. Real	estate taxes				4a.	\$		0.00
	4b. Prope	erty, homeowner's				4b.	\$		0.00
		e maintenance, rep eowner's associati				4c. 4d.	_		200.00
5.				orninium dues our residence, such as ho	me equity loans	4a. 5.			0.00 423.00

Schedule J: Your Expenses Official Form 106J page 1

Debtor 1 Debtor 2		Case num	ber (if known)	18-23131
Z	- COSSIST ONOR LOI WIII	Judo Huill	- 3. (INIOWII)	
6. Util	ities:			
6a.	Electricity, heat, natural gas	6a.	\$	200.00
6b.	Water, sewer, garbage collection	6b.	\$	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	391.00
6d.	Other. Specify:	6d.	\$	0.00
. Foo	od and housekeeping supplies	7.	\$	800.00
. Chi	Idcare and children's education costs	8.	\$	379.00
. Clo	thing, laundry, and dry cleaning	9.	\$	125.00
o. Per	sonal care products and services	10.	\$	100.00
1. Med	dical and dental expenses	11.	\$	550.00
	nsportation. Include gas, maintenance, bus or train fare. not include car payments.	12.	\$	700.00
	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
	aritable contributions and religious donations	14.	\$	0.00
	urance.			<u> </u>
	not include insurance deducted from your pay or included in lines 4 or 20.			
	. Life insurance	15a.	\$	0.00
15b	. Health insurance	15b.	\$	0.00
15c	. Vehicle insurance	15c.	\$	166.86
15d	. Other insurance. Specify:	15d.	\$	0.00
6. Tax	es. Do not include taxes deducted from your pay or included in lines 4 or 20.		· -	
Spe	cify:	16.	\$	0.00
	allment or lease payments:			
17a	. Car payments for Vehicle 1	17a.	\$	276.00
17b	. Car payments for Vehicle 2	17b.	\$	0.00
17c	. Other. Specify:	17c.	\$	0.00
17d	. Other. Specify:	17d.	\$	0.00
	ir payments of alimony, maintenance, and support that you did not report as			0.00
ded	lucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	
	er payments you make to support others who do not live with you.		\$	0.00
	cify:	19.		
	er real property expenses not included in lines 4 or 5 of this form or on Sche			0.00
	. Mortgages on other property	20a.		0.00
	Real estate taxes	20b.	·	0.00
	Property, homeowner's, or renter's insurance	20c.	·	0.00
	. Maintenance, repair, and upkeep expenses	20d.		0.00
	. Homeowner's association or condominium dues	20e.	·	0.00
. Oth	er: Specify: Pet care	21.	+\$	75.00
Gy	m membership		+\$	30.00
Cal	culate your monthly expenses			
	. Add lines 4 through 21.		\$	5,515.86
	. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	5,515.66
22c	. Add line 22a and 22b. The result is your monthly expenses.		\$	5,515.86
B. Cal	culate your monthly net income.			
	. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	5,712.56
	. Copy your monthly expenses from line 22c above.	23b.	·	5,515.86
	1, 7, 7 · · · · · · · · · · · · · · · · ·	_00.		
230	. Subtract your monthly expenses from your monthly income.			
	The result is your <i>monthly net income</i> .	23c.	\$	196.70
For	you expect an increase or decrease in your expenses within the year after yo example, do you expect to finish paying for your car loan within the year or do you expect your			ease or decrease because of a
_	ification to the terms of your mortgage?			
\Box	Yes Explain here:			

Official Form 106J Schedule J: Your Expenses page 2

Fill in this information to identify your case:						
Debtor 1	Daniel Thomas Lorum					
	First Name	Middle Name	Last Name			
Debtor 2	Jessica Susan Lo	orum				
(Spouse if, filing) First Name		Middle Name	Last Name			
United States Bankruptcy Court for the:		EASTERN DISTRICT (OF WISCONSIN			
Case number	Case number 18-23131					
(if known)						

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is	NOT an attorney to help you fill out bankruptcy forms?
■ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
Harten and the state of the sta	
that they are true and correct.	read the summary and schedules filed with this declaration and
X /s/ Daniel Thomas Lorum	X /s/ Jessica Susan Lorum
Daniel Thomas Lorum	Jessica Susan Lorum
Signature of Debtor 1	Signature of Debtor 2
Date November 23, 2018	Date November 23, 2018

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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